

Application Form for Covenant Not to Sue CGS Section 22a-133bb

Please complete this form in accordance with the instructions (DEP-CNTSBB-INST-400) to ensure the proper handling of your application. Print or type unless otherwise noted.

DEP USE ONLY
DEI GOL GIVET
A 11 4 N
Application No.
11

Part I: Applicant Information

1.	Identify the prospective purchaser or owner of the real property, or the lending institution requesting a covenant not to sue pursuant to Section 22a-133bb of the Connecticut General Statutes (CGS) as amended by Public Act 98-253:			
	Name:			
	Mailing Address:			
	City/Town:		State:	Zip Code:
	Business Phone:		ext.	Fax:
	Contact Person:		Title:	
	Identify whether the applicant is the:			
	☐ Prospective Purchaser	Owner		Lending Institution
	If the applicant is a lending institution, cor	mplete Item #3 belo	W.	
	Check here if there are co-applicants required information.	. If so, label and atta	ach additional sh	neet(s) to this sheet with the
2.	List primary contact for departmental cor	respondence and inc	quiries, if differer	nt than the applicant.
	Name:			
	Mailing Address:			
	City/Town:		State:	Zip Code:
	Business Phone:		ext.	Fax:
	Contact Person:		Title:	
 If the applicant is a lending institution, identify the prospective purchaser or owner (as it appears in Lan Records) of the real property who has conveyed or who will convey a security interest in such property. 			`	
	Name:			
	Mailing Address:			
	City/Town:		State:	Zip Code:
	Business Phone:		ext.	Fax:
	Contact Person:		Title:	

Part I: Applicant Information (continued)

						=
3.	List attorney or other rep	presentative, if applic	cable:			
	Firm Name:	-				
	Mailing Address:					
	City/Town:			State:	Zip Code:	
	Business Phone:			ext.	Fax:	
	Attorney:					
4.	List any engineer(s) or o	other consultant(s) e	mployed or retaine	ed to assist	in preparing the application.	
	Name:					
	Mailing Address:					
	City/Town:			State:	Zip Code:	
	Business Phone:			ext.	Fax:	
	Contact Person:			Title:		
	Service Provided:					
1						
	Check here if additi	ional sheets are nec	essary, and label a	and attach t	hem to this sheet.	_
Par	t II: Property Inforn	nation				
						
1.	Description of real prop	perty to which the co	venant not to sue	will be appli	cable ("the property"):	
	Street Address or Desc	cription of Location:				
	City/Town:			State:	Zip Code:	
l	<i>,</i>			C 13.11	—r	
	Description in Property	Deed:				
	Recorded on page	of volume	, of the Town of			
	land records, as lot	, block	on map		in the Tax Assessor's Office.	
	Diagon submit as Atto	schmont 1 on 1-2 s	current showing the	aranarty.		
	Please submit, as Atta	1C∏HEIILA, an A-∠ s	urvey snowing ine	property.		
2.	Current owner of the procurrent owner):	roperty as it appears	in Land Records ((if applicant	identified in Part 1, Item 1 is not the	
	Name:					
	Mailing Address:					
	City/Town:			State:	Zin Codo:	
	Oity/TOWII.			Otato.	Zip Code:	1
	Business Phone:			ext.	Fax:	

Part II: Property Information (continued)

3.	Current use of the property:
4.	Number of people currently employed at the property:
5.	Description of the jobs currently supported at the property:
6.	Proposed use of the property:
7.	Number of existing jobs which will be maintained:
8.	Number of additional jobs to be created by the proposed use:
9.	Description of the existing jobs to be maintained and additional jobs to be created:

Part II: Property Information (continued)

10.	Brief description of history of use and ownership of the subject property, to the extent known:
11.	Description of the nature and extent of soil, surface water and groundwater contamination at the property, the sources of the contamination, and the dates of release of the contaminants to the environmental media, to the extent known. Attach additional sheets if necessary. Please reference or attach, as Attachment B, a copy of an environmental assessment report for the property which describes the nature, extent and degree of contamination in more detail.
12.	Has a detailed written plan for remediation of the soil and groundwater contamination at the property in accordance with the standards adopted by the Commissioner pursuant to CGS Section 22a-133k, as amended, been approved by the Commissioner of the Department of Environmental Protection (DEP) or by a Licensed Environmental Professional (LEP)?
	☐ Yes ☐ No
	If yes, provide the following information:
	Title of Plan:
	Preparer of Plan:
	Date of Plan: Date of Approval:
	Identify if approved by: Commissioner of DEP or LEP
	If approved by a LEP, will the plan be implemented pursuant to (check one)
	☐ CGS Section 22a-133x ☐ CGS Section 22a-133y ☐ CGS Section 22a-134a
	Please attach, as Attachment C, a copy of the Approval of Remediation Plan.
	Please attach, as Attachment D, a copy of the approved Remediation Plan (optional).

Part II: Property Information (continued)

13.	13. Has a final remedial action report which describes the completion of remedial actions at the property been approved by the Commissioner of the DEP or by a LEP, or has a LEP verified, pursuant to CGS Section 22a-133x that the property has been remediated in accordance with the standards adopted by the Commissioner pursuant to CGS Section 22a-133k, as amended? Yes No			
	If yes, indicate date of approval or verification:			
	Check the appro	opriate box:		
	☐ Commission	ner Approval of Report		
	If yes, provide the Title of Report:	e following information:		
	Preparer of Repo			
	Date of Report:	Date of Approval:		
	Please attach, a	s Attachment E, a copy of the Approval of Final Remedial Action Report, if applicable.		
	Please attach, as Attachment F, a copy of the Final Remedial Action Report, if applicable.			
Part III: Supporting Documents Please check the attachments submitted as verification that <i>all</i> applicable attachments have been submitted with this application form. When submitting any supporting documents, please label the documents as indicated in this part (e.g., Attachment A, etc.) and be sure to include the applicant's name.				
	Attachment A:	A-2 Survey		
	Attachment B:	Environmental Assessment Report (optional)		
	Attachment C:	Approval of Remediation Plan		
	Attachment D:	Remediation Plan (optional)		
	Attachment E:	Approval of Final Remedial Action Report, if applicable		
	Attachment F:	Final Remedial Action Report, if applicable		
Note:	Note: Please submit the Application Form, including the appropriate Certification Form and all Supporting Documents to:			
		REMEDIATION DIVISION BUREAU OF WATER PROTECTION AND LAND REUSE DEPARTMENT OF ENVIRONMENTAL PROTECTION 79 ELM STREET HARTFORD, CT 06106-5127		

Part IV: Certification Form A: Applicant Is One or More Individuals, or a Partnership

(All individuals and partners must sign)

`	<u> </u>		
"I have personally examined and am familiar with the information con on reasonable investigation, including my inquiry of those individuals is true and accurate to the best of my knowledge and belief.	· ·		
I certify that, to the best of my knowledge, I have not established or created a facility or condition at or on the property described in Part II, Item #1 of this form which reasonably could be expected to create a source of pollution to the waters of the state for purposes of CGS Section 22a-432.			
I certify that, to the best of my knowledge, I have no affiliation with any subject property through any direct or indirect familial relationship or a purchase of the subject property or by acquisition of the subject proper	ny contractual, corporate, or financial relationship, other than by		
Applicable only if the Remedial Action Plan has been approved by a	icensed Environmental Professional:		
I certify that the remedial action plan approved by a Licensed Environ be implemented pursuant to CGS Section 22a-133x, 22a-133y, or 22a			
Applicable only if the final Remedial Action Report for the property has been approved by the Commissioner of the Department of Environmental Protection or by a Licensed Environmental Professional, or if a Licensed Environmental Professional has verified, pursuant to CGS Section 22a-133x that the property has been remediated in accordance with regulations adopted by the Commissioner pursuant to CGS Section 22a-133k:			
I certify that, to the best of my knowledge, there has been no discharge, spillage, uncontrolled loss, seepage or filtration of hazardous waste at the subject property after the date that the final Remedial Action Report for the property was approved by the Commissioner of the Department of Environmental Protection or by a Licensed Environmental Professional, or after the date that the Licensed Environmental Professional verified pursuant to CGS Section 22a-133x that the property has been remediated in accordance with regulations adopted by the Commissioner pursuant to CGS Section 22a-133k.			
I certify that I will redevelop the subject property for productive use or	continue productive use of the property.		
I understand that a false statement in this document or its attachments may be punishable as a criminal offense, in accordance with Section 22a-6 of the General Statutes, pursuant to Section 53a-157b of the General Statutes, and in accordance with any other applicable statute."			
Authorized Signature(s)	Date Signed		
Name of Person Signing (print or type)	Title (if applicable)		
Name of Partnership, if applicable			
STATE OF }	99		
COUNTY OF }	SS. (Town)		
The foregoing was subscribed to and sworn to before me this	day of , 20 ,		
by			
(Name of Authorized Signatory for Applicant, Title and Company, if applicable)			
who personally appeared, and that person, as such, satisfactorily prove instrument for the purposes therein contained.	en to be authorized to do so, as applicant, executed the foregoing		
Signature of Notary/Commissioner of Superior Court	Name of Notary/Commissioner of Superior Court (print or type)		
My commission expires / /			
Check here if additional signatures are required. If so, please ren	roduce this sheet and attach signed conies to this sheet		

DEP-CNTSBB-APP-400 6 of 9 Rev. 07/05/06

Part IV: Certification Form B: Applicant is a Corporation

	-		
"I have personally examined and am familiar with the information cont on reasonable investigation, including my inquiry of those individuals is true and accurate to the best of my knowledge and belief.	· ·		
I certify that, to the best of my knowledge, (Name of	Corporation)		
has not established, created, or maintained a facility or condition at the expected to create a source of pollution to the waters of the state for pu			
I certify that, to the best of my knowledge, I have no affiliation with any subject property through any direct or indirect familial relationship or a purchase of the subject property or by acquisition of the subject property	ny contractual, corporate, or financial relationship, other than by		
Applicable only if the Remedial Action Plan has been approved by a L	icensed Environmental Professional:		
I certify that the remedial action plan approved by a Licensed Environmental Professional, referenced in Part II, Item #12 of this form, will be implemented pursuant to CGS Section 22a-133x, 22a-133y, or 22a-134a.			
Applicable only if the final Remedial Action Report for the property has been approved by the Commissioner of the Department of Environmental Protection or by a Licensed Environmental Professional, or if a Licensed Environmental Professional has verified, pursuant to CGS Section 22a-133x that the property has been remediated in accordance with regulations adopted by the Commissioner pursuant to CGS Section 22a-133k:			
I certify that, to the best of my knowledge, there has been no discharge, spillage, uncontrolled loss, seepage or filtration of hazardous waste at the subject property after the date that the final Remedial Action Report for the property was approved by the Commissioner of the Department of Environmental Protection or by a Licensed Environmental Professional, or after the date that the Licensed Environmental Professional verified pursuant to CGS Section 22a-133x that the property has been remediated in accordance with regulations adopted by the Commissioner pursuant to CGS Section 22a-133k.			
I certify that this corporation will redevelop the subject property for proc	ductive use or continue productive use of the property.		
I understand that a false statement in this document or its attachments may be punishable as a criminal offense, in accordance with Section 22a-6 of the General Statutes, pursuant to Section 53a-157b of the General Statutes, and in accordance with any other applicable statute."			
Authorized Signature(s)	Date Signed		
Name of Person Signing (print or type)	Title (if applicable)		
Name of Corporation			
STATE OF }			
COUNTY OF }	SS. (Town)		
The foregoing was subscribed to and sworn to before me this	day of , 20 ,		
by (Name of Authorized Signatory for Applicant, Title and Company, it			
who personally appeared, and that person, as such, satisfactorily proven to be authorized to do so, as applicant, executed the foregoing instrument for the purposes therein contained.			
Signature of Notary/Commissioner of Superior Court	Name of Notary/Commissioner of Superior Court (print or type)		
My commission expires / /			

DEP-CNTSBB-APP-400 7 of 9 Rev. 07/05/06

Part IV: Certification Form C: Applicant Is A Municipal, State or Federal Agency or Department

"I have personally examined and am familiar with the information contained in this application and all attachments, and certify that, based on reasonable investigation, including my inquiry of those individuals responsible for obtaining the information, the submitted information is true and accurate to the best of my knowledge and belief.			
I certify that, to the best of my knowledge,	Name of Agency or Department)		
has not established or created a facility or condition at or on the prope to create a source of pollution to the waters of the state for purposes of			
I certify that this agency or department is not affiliated with any perso property through any contractual, corporate, or financial relationship, of subject property by court judgment of foreclosure.	· · · · · · · · · · · · · · · · · · ·		
I certify that this agency or department will redevelop the subject pro	perty for productive use or continue productive use of the property.		
Applicable only if the Remedial Action Plan has been approved by a l	Licensed Environmental Professional:		
I certify that the remedial action plan approved by a Licensed Environ be implemented pursuant to CGS Section 22a-133x, 22a-133y, or 22a			
Applicable only if the final Remedial Action Report for the property has been approved by the Commissioner of the Department of Environmental Protection or by a Licensed Environmental Professional, or if a Licensed Environmental Professional has verified, pursuant to CGS Section 22a-133x that the property has been remediated in accordance with regulations adopted by the Commissioner pursuant to CGS Section 22a-133k:			
I certify that, to the best of my knowledge, there has been no discharge, spillage, uncontrolled loss, seepage or filtration of hazardous waste at the subject property after the date that the final Remedial Action Report for the property was approved by the Commissioner of the Department of Environmental Protection or by a Licensed Environmental Professional, or after the date that the Licensed Environmental Professional verified pursuant to CGS Section 22a-133x that the property has been remediated in accordance with regulations adopted by the Commissioner pursuant to CGS Section 22a-133k.			
I understand that a false statement in this document or its attachments may be punishable as a criminal offense, in accordance with Section 22a-6 of the General Statutes, pursuant to Section 53a-157b of the General Statutes, and in accordance with any other applicable statute."			
Authorized Signature(s)	Date Signed		
Name of Person Signing (print or type)	Title (if applicable)		
Name of Municipal, State or Federal Agency or Department			
STATE OF }			
COUNTY OF }	SS. (Town)		
The foregoing was subscribed to and sworn to before me this	day of , 20 ,		
by (Name of Authorized Signatory for Applicant, Title and Company, if applicable)			
who personally appeared, and that person, as such, satisfactorily proven to be authorized to do so, as applicant, executed the foregoing instrument for the purposes therein contained.			
Signature of Notary/Commissioner of Superior Court	Name of Notary/Commissioner of Superior Court (print or type)		
My commission expires / /			

DEP-CNTSBB-APP-400 8 of 9 Rev. 07/05/06

Part IV: Certification Form D: Lending Institution Requesting a Covenant Not to Sue

"I have personally examined and am familiar with the information contained in this application and all attachments, and certify that, based on reasonable investigation, including my inquiry of those individuals responsible for obtaining the information, the submitted information is true and accurate to the best of my knowledge and belief.		
I certify that, to the best of my knowledge,	(Name of Lending Institution)	
has not established, created, or maintained a facility or condition at expected to create a source of pollution to the waters of the state for		
I certify that, to the best of my knowledge, this lending institution is no General Statutes for any pollution or source of pollution on the subjection	· · · · · · · · · · · · · · · · · · ·	
I understand that a false statement in this document or its attachments may be punishable as a criminal offense, in accordance with Section 22a-6 of the General Statutes, pursuant to Section 53a-157b of the General Statutes, and in accordance with any other applicable statute."		
Authorized Signature(s)	Date Signed	
Name of Person Signing (print or type)	Title (if applicable)	
Name of Lending Institution		
	}	
	}	
The foregoing was subscribed to and sworn to before me this	day of , 20 ,	
by (Name of Authorized Signatory for Applicant, Title and Company, if applicable)		
who personally appeared, and that person, as such, satisfactorily proven to be authorized to do so, as applicant, executed the foregoing instrument for the purposes therein contained.		
Signature of Notary/Commissioner of Superior Court	Name of Notary/Commissioner of Superior Court (print or type)	
My commission expires / /		

DEP-CNTSBB-APP-400 9 of 9 Rev. 07/05/06